

CONTROL BLOCK:

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1

(PLEASE PRINT OR TYPE ALL REQUIRED INFORMATION)

0	1	P A S E S I										2	0	0	-	0	0	0	0	0	-	0	0	3	4	1	1	1	1	4	5					
7	8	LICENCE CODE										14	LICENCE NUMBER										25	LICENCE TYPE										30	57 CAT 58	

CON'T

0 1 REPORT SOURCE 6 0 5 0 0 0 3 8 7 7 0 3 1 0 8 3 8 0 4 0 5 8 3 9
2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20

EVENT DESCRIPTION AND PROBABLE CONSEQUENCES (10)

0 2 Six instruments were found to be omitted from the Operation's shiftly surveillance

0 3 log that require channel checks every 12 hrs. (Technical Specification Surveillance

0 4 Requirement 4.3.4.1-1.1 and 4.3.2.1-1.1.a.3). All six instruments were being func-

0 5 tionally checked monthly by the I&C Group. There were no consequential effects to

0 6 the public health and safety.

SYSTEM CODE I B ⑪		CAUSE CODE D ⑫		CAUSE SUBCODE Z ⑬		COMPONENT CODE Z Z Z Z Z Z ⑭		COMP. SUBCODE Z ⑮		VALVE SUBCODE Z ⑯	
LER/RO REPORT NUMBER 8 3 ⑰		EVENT YEAR —		SEQUENTIAL REPORT NO. 0 4 5		OCCURRENCE CODE / 0 3		REPORT TYPE L —		REVISION NO. 0	
ACTION TAKEN G ⑱	FUTURE ACTION X ⑲	EFFECT ON PLANT Z ⑳	SHUTDOWN METHOD Z ㉑	HOURS 0 0 0 0 ㉒	ATTACHMENT SUBMITTED N ㉓	NPRD-4 FORM SUB. N ㉔	PRIME COMP. SUPPLIER Z ㉕	COMPONENT MANUFACTURER Z 9 9 9 ㉖			

CAUSE DESCRIPTION AND CORRECTIVE ACTIONS (27)

1 0 | Inadequate review of the Technical Specifications when the shiftly surveillance
1 1 | procedure was developed and a breakdown in the operational review of the Plant
1 2 | Modification Request (PMR) process caused these omissions. The instruments were
1 3 | added to the shiftly surveillance log. The operator's 12 hr., 24 hr. and weekly
1 4 | surveillance procedures are being reviewed and the PMR process is under review.

FACILITY STATUS		% POWER	OTHER STATUS	METHOD OF DISCOVERY	DISCOVERY DESCRIPTION
1	5	B	(28)	0 0 0 (29)	N/A
				A (31)	Independent review

ACTIVITY		CONTENT		RELEASED OF RELEASE		AMOUNT OF ACTIVITY		LOCATION OF RELEASE	
1	6	Z	(33)	Z	(34)	N/A		N/A	

PERSONNEL EXPOSURES		DESCRIPTION	
NUMBER	TYPE		
17	000	37	Z
		38	N/A

PERSONNEL INJURIES		DESCRIPTION	
NUMBER			
1	0	0	0
2	0	0	0
3	0	0	0
4	0	0	0
5	0	0	0
6	0	0	0
7	0	0	0
8	0	0	0
9	0	0	0
10	0	0	0
11	0	0	0
12	0	0	0
13	0	0	0
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93	0	0	0
94	0	0	0
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96	0	0	0
97	0	0	0
98	0	0	0
99	0	0	0
100	0	0	0

7 8 9 10 11 12

LOSS OF OR DAMAGE TO FACILITY
TYPE DESCRIPTION (43)

8304180252 830405
PDR ADOCK 05000387

1 9 Z (42) N/A S PDR
7 8 9 10 80
PUBLICITY (45) NBC USE ONLY

ISSUED		DESCRIPTION		NRC USE ONLY									
2	0	N	44	N/A									

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